



**Welcome – we will start at 11:30 PST** 

**Preparing for CDE<sup>®</sup> Exam  
2018**

Beverly Dyck Thomassian, RN, MPH, BC-ADM, CDE<sup>®</sup>  
President, Diabetes Education Services




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**Preparing For the CDE<sup>®</sup> Exam**

- Eligibility requirements
- Test Updates
- Get ready for success



\*Certified Diabetes Educator<sup>®</sup> and CDE<sup>®</sup> are registered marks owned by NCBDE. The use of DES products do not guarantee successful passage of the CDE<sup>®</sup> exam. NCBDE does not endorse any preparatory or review materials for the CDE<sup>®</sup> exam, except for those published by NCBDE.




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**Topics**

- ▶ Eligibility requirements
- ▶ Definition of a Diabetes Educator
- ▶ Exam content
- ▶ Study strategies
- ▶ Test taking tips
- ▶ [Resources](#)


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## Some Notes of Clarification

- ▶ Diabetes Ed Services has no relationship with National Certification Board of Diabetes Educators (NCBDE).
- ▶ For more info visit [www.ncbde.org](http://www.ncbde.org)

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## CDE® Coach App – Download Success



Coach in your pocket.

Med Pocket Cards. Resources. Courses.

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Standards of Care  
Meds PocketCards  
Question of the Week  
Online Course Viewing



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## Why Take the CDE® Exam



- ▶ Demonstrates to people with diabetes, employers, and third party payers that the CDE® possesses distinct and specialized knowledge, thereby promoting quality of care for patients with diabetes.
- ▶ CDE® is the recognized standard for competence in diabetes self-management education.
- ▶ Given the diabetes epidemic, access to CDE®s is critical



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## What is a CDE®?

- ▶ A health care professional with comprehensive knowledge and experience in diabetes management, pre-diabetes, and diabetes prevention.
- ▶ Educates and supports people w/ diabetes to understand and manage the condition.
- ▶ Promotes self-management to achieve individualized behavioral and treatment goals that optimize health outcomes.



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## 2018 - Professional Practice Experience – Must meet all

- ▶ A minimum of two years (to the day) of professional practice experience in the discipline under which one is applying for certification
- AND
- ▶ Minimum of 1,000 hours of professional practice experience within the past 4 years in diabetes self-management education with a minimum of 40% (400 hours = about 8 hrs a week) accrued in the most recent year preceding application.
- AND
- ▶ Minimum of 15 clock hours of continuing diabetes education within 2 years prior to applying for certification.



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## Unique Qualifications Pathway –

- ▶ Designed for health professionals holding an advanced degree in a health related area/concentration
- ▶ This pathway has different eligibility requirements and involves a “pre-application” process plus 2000 hrs DSME.
- ▶ For more: [info@ncbde.org](mailto:info@ncbde.org) or call 877 -239- 3233



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## Professional Degree, DSME Practice Hours, plus CE

- ▶ Only experience occurring AFTER completing your professional degree can be counted toward the Professional Practice Experience requirement.
- ▶ Need 1000 hours of DSME Practice Hours
- ▶ If on Unique Qualifications Pathway, need 2000 hours of DSME



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## Practice hours through Volunteering

- ▶ 1000 of the needed professional practice hours can be gained through providing DSME as a volunteer
- ▶ Supervisor must attest that DSME provided meets criteria



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## From NCBDE Handbook

Yes No

1. As a clinical psychologist, registered nurse, occupational therapist, optometrist, pharmacist, physical therapist, physician, podiatrist, master certified health education specialist, certified clinical exercise specialist, registered clinical exercise physiologist, registered dietitian, dietitian nutritionist, or registered physician assistant, is your license, certification or registration current, active and unrestricted?\*
- OR**
- Do you hold a minimum of a master's degree in social work from a United States college or university accredited by a nationally recognized regional accrediting body?
- OR**
- If you do not meet either of these, you are encouraged to investigate NCBDE's Unique Qualifications Pathway. Please visit our website for more information on that pathway.
2. Has your practice experience occurred within the United States or its territories?
3. Has all your practice experience occurred since you met requirement #1 above?
4. Do you have a minimum of 2 calendar years (to the day) of practice experience since you received the license, registration or advanced degree as outlined above (within the last 4 years)?
5. Have you accrued 1,000 hours of practice experience in diabetes self-management education (DSME) within the last 4 years?
6. Has a minimum of 40% (or 400 hours) of the 1,000 hours of DSME practice experience been accrued within the past year?
7. Have you completed a minimum of 15 hours of continuing education activities\*\* applicable to diabetes within the past 2 years?

If the answer to any of the above questions is "no", you are not ready to apply for the Certification Examination for Diabetes Educators.



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## Quick Question – Multiple answers

What are some of the underlying themes of the CDE exam?

- a. CDEs support people in making behavior change
- b. CDEs empower patients to improve diabetes self-management
- c. CDE's consider the individuals needs, goals and life experiences
- d. CDE's help all people with diabetes achieve an A1c less than 7%
- e. CDEs collaborate and provide ongoing care



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## Diabetes Self-Management Education and Support (DSMES)

- ▶ All people with prediabetes and diabetes should participate in DSMES to facilitate the knowledge, skills and ability necessary to self-manage their diabetes.
- ▶ DSMES provides support to implement and sustain skills and behaviors needed for ongoing self-management.



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## Diabetes Self Management Ed Benefits

- ▶ Improves knowledge
- ▶ Lowers A1c
- ▶ Lose weight
- ▶ Improved quality of life
- ▶ Reduced all cause mortality
- ▶ Reduced health care costs



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## Diabetes Self Management Ed Benefits

- ▶ Increased primary care and preventive services
- ▶ Less frequent use of acute care and inpatient admissions
- ▶ More likely to follow best practice recommendations (esp those with Medicare)
  - ▶ Only 5-7% of Medicare pts receive DSME)



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## DSME Overall Objective

- ▶ Support informed decision making
- ▶ Problem solving
- ▶ Active collaboration to improve clinical outcomes and quality of life
- ▶ Avoid judgmental words that increase feelings of shame and/or guilt
- ▶ Choose words and phrases that put people first
- ▶ Avoid shame and blame



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## Definition of Diabetes Self-Management Education (DSME)

- Health professionals who have appropriate credentials and experience
- It involves person with prediabetes or diabetes, caregivers and educator
- Defined as **ongoing** process of facilitating the knowledge, skill, and ability necessary for self-care.



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## Definition of Diabetes Education

**Assessment:** Participant's DE needs are identified with assessment & support of CDE



**Education Plan:** Individualized plan that reflects participant's self-management goals, current evidence and practice guidelines. Includes criteria for evaluating outcomes.



**Interventions:** Educational and behavioral interventions that include strategies directed toward meeting participant's self-management goals.



**Ongoing Support:** Options and resources are provided by the educator and selected by the participant to meet self-management goals



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## Definition of Diabetes Education

**Participant Progress:** Educator monitors and communicates whether participant is achieving self-management goals and other outcome(s) to evaluate effectiveness of interventions. Additional assessments are based on participant's needs across lifespan.



**Documentation:** Assessment, education plan, intervention, and outcomes are documented in participant's health record.



**Services Development/Administration:** Development and administrative activities performed as part of DSMEs services



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## Critical Points to Provide Self-Management Education

- ▶ At diagnosis
- ▶ Annually to assess education, nutrition and emotional needs
- ▶ When new complicating factors arise that influence self-management
- ▶ Transitions in care



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## Applying to take the CDE® Exam

At the time of your online application you will receive:

- ▶ On-line notification of either approval
- ▶ Or that you have been selected for audit
- ▶ If you are submitting a paper application, call AMP if it has been more than 4 weeks since application was mailed and you have not received notice of receipt or audit. Call the AMP at (913) 895-4600



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## What is included in audit if requested?

- ▶ Licensure
- ▶ Documentation of Professional Practice Experience –
  - ▶ A journal of weekly hours of providing DSME
  - ▶ Supervisor to verify
- ▶ CE course verification
- ▶ Employment verification signed by supervisor



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## Test Taking Window

- ▶ The exam is administered on an ongoing basis
- ▶ Once application approved, candidates must schedule their testing appointment within a 90 day window on a date of their choosing
  - ▶ schedule an appointment to take the examination on a first-come, first-served basis through AMP's online scheduling system
  - ▶ See application booklet for more details



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## When will I get my results?

- ▶ You will receive your test results the same day
- ▶ You can retake the test as many times as needed
- ▶ Cost –
  - ▶ 1<sup>st</sup> time \$350
  - ▶ Renewal - \$250



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## Scoring the Exam

- ▶ Reported as raw and scaled scores
  - ▶ Raw score: number of right answers
  - ▶ Scaled score: statistically derived from the raw score
- ▶ Total score determines pass/fail and is reported as a scaled score ranging between 0 and 99
- ▶ To pass: 70 scaled score units



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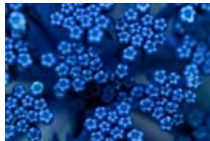
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## CDE® Exam Pass rates over time

- ▶ 2008 – 80%
- ▶ 2009 – 69 % (test changed based on work study analysis and computerized)
- ▶ 2010 – 69%
- ▶ 2011 -65%
- ▶ 2012 – 63.5%
- ▶ 2013 – 67 and 69%
- ▶ 2014 - 66 and 67%
- ▶ 2015 - 62 and 64% (test updated)
- ▶ 2016 – 67%



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## Overview of CDE® Exam



- ▶ Composed of 200 multiple-choice, objective questions with a total testing time of four (4) hours.
- ▶ Based on job analysis completed in 2013, which surveyed diabetes educators about the tasks they performed.



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## Exam Details

- ▶ Questions are linked directly to a task or tasks.
- ▶ Each question is designed to test if the candidate possesses the **knowledge necessary to perform the task or has the ability to apply it to a job situation**.
- ▶ 25 of the 200 questions are new - but are **not** counted in the determination of individual examination scores.



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## Quick Question – Multiple answers

What are some study strategies that will help you succeed?

- Focus your study time on topics you are confident in.
- Take as many practice tests as possible
- Read as many books on diabetes as possible
- Develop a study plan and block off study time.
- Teach the content to someone else



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## Exam Content

- ▶ Assessment (60)
  - ▶ Learning/Self-Care Behaviors (20)
  - ▶ Medical, Psycho-Socioeconomic and Health Status (20)
  - ▶ Current Knowledge and Self-Management Skills (20)



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## Exam Content

- ▶ Intervention (89)
  - ▶ Collaboration with Patient, Family, Caregiver, and Healthcare Team (16)
  - ▶ Teach/Counsel Regarding Principles of Diabetes Care (50)
  - ▶ Evaluate, Revise and Document (17)
  - ▶ Follow-up and Referral Recommendations (6)



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## Exam Content

- ▶ Education and Program Standards (26)
  - ▶ National Standards for Diabetes Self Management Education (8)
  - ▶ Clinical Practice (16)
    - ▶ Inpt and Outpt Standards for ADA, AACE
  - ▶ Promote Diabetes Advocacy (2)



- ▶ For detailed outline look in Testing Handbook



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## Taking the Test

- ▶ Questions
- ▶ Answers
- ▶ Pitfalls



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## Reading too Fast Pitfalls

- ▶ Choosing a “good” answer, but not the right one for the **stem**
  - ▶ key intent of question
- ▶ Failing to read an important words (always, never, most, probably, usually)
- ▶ Choosing an answer you did not understand because the others seem too easy



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## Empowerment Errors

- ▶ Focusing on the medical need rather than the psychosocial needs
- ▶ Failing to keep in mind the patient’s characteristics (age, type of diabetes, etc.)
- ▶ We are supporting patients efforts toward behavior change.



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## Thinking Pitfalls

- ▶ Imagining a right answer and getting thrown when it is not among the choices
- ▶ Over thinking question/answers
- ▶ Choosing an answer that did not fit the situation
- ▶ Using the goals in your clinical setting. Focus on national goals.



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## Take a Practice Test – Learn how to “work” test questions

- ▶ Weed through the details
- ▶ Make sure you REALLY understand key intent of question
- ▶ Find the stem
  - ▶ Identifies key intent of the question
- ▶ Read all the options or answers
- ▶ Eliminate obvious wrong answers
- ▶ Select **BEST** option



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## Look for Clues in The Answers

- ▶ Answers with the following words are usually **incorrect**: always, never, all, none, only, must, and completely
- ▶ Answers with the following words are usually **correct**: seldom, most, generally, tend to, probably, usually



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## Getting to the Right Answers



- ▶ Do not leave any answers blank
- ▶ Look for clues in the question
- ▶ Don't get lured in by juicy answers
- ▶ Avoid imposing your life experience into the question/answer
- ▶ Keep breathing – Get up and move
- ▶ Even simple math problem should be worked out on scratch paper



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## Three Types of Questions

- Recall – facts, principles, procedures
- Application – ie – application of knowledge that varies based on pt characteristics
- Analysis – integration or synthesis of a variety of concepts or elements (ie evaluating complex problems with many variables.



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## Sample Question -1

- ▶ A patient is admitted to the hospital with elevated glucose levels with a strong family history of diabetes. She is started on fluid replacement and is placed on a clear liquid diet. Her father is in the room and is very concerned. Which of the following would suggest a diagnosis of new onset type 1 diabetes vs type 2 diabetes?
  - A. Hyperglycemia
  - B. Polyuria
  - C. Ketosis
  - D. Polydipsia



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## Sample Question 2

- ▶ MJ has type 1 diabetes and wants to know the possible complications that can result from hyperglycemia during the first trimester of pregnancy. Which of the following complications can result from 1<sup>st</sup> trimester hyperglycemia?
  - A. macrosomia
  - B. vascular defects
  - C. shoulder dystocia
  - D. spina bifida



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## Vignette Style Question

- ▶ Read the following vignette to answer the next 3 questions.
- ▶ A 47 yr old man with newly diagnosed type 2 diabetes. Additional known information.
  - ▶ Married, with 2 teenagers
  - ▶ Professor, obese
  - ▶ Started on Metformin 500mg BID
  - ▶ Father died of kidney failure secondary to diabetes



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## Vignette Style Question 1

- ▶ Given what you know about this patient, what emotions would you expect him to express?
  - A. Fear of hypoglycemia
  - B. Reluctance to start on insulin
  - C. Panic disorder
  - D. Fear of complications

▶ analysis



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## Vignette Style Question 2

- ▶ What is most likely to be a potential barrier to lifestyle change?
- A. Difficulty exercising due to obesity
  - B. Excessive alcohol intake
  - C. Teenage children
  - D. Long work hours



▶ analysis



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## Vignette Style Question 3

- ▶ The patient requests information about healthy eating. Which meal planning approach best suits this individual until he can see a registered dietitian?
- A. 1,200 calorie exchange plan
  - B. Avoid all concentrated sweets
  - C. Eat 3 meals a day with snacks in between
  - D. Healthy eating based on the “My Plate” method

▶ application



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## Sample Question 3

Metformin is an antidiabetic agent different than that of sulfonylurea drugs. Some features of the drug are that it:

- A. Stimulates insulin secretion and increases hepatic glucose production.
- B. Causes hypoglycemia
- C. Lowers hyperglycemia in persons with diabetes, but does not lower blood glucose levels in people without diabetes.
- D. Results in weight gain and increase in plasma glucose levels.

recall



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## New PocketCards – Updated 3/18



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## Sample question 4

A person with type 2 is on a twice daily dose basal/bolus insulin and complains of waking up with morning headaches. If the fasting capillary BG is 291, this person should be advised to:

- A. Increase evening dose of basal insulin
- B. Increase morning dose of bolus insulin
- C. Check 3am blood glucose
- D. Eliminate bedtime snack

analysis

## Study Habits

- ▶ Find your best time of day to study
- ▶ Determine your learning style
  - ▶ Auditory – discussion, study groups, tapes
  - ▶ Visual – books, handouts, notes, videos
  - ▶ Kinesthetic – workshops, demonstration
- ▶ Set up a study space
- ▶ Set up a study plan
  - ▶ Schedule your time
  - ▶ Make an appointment with yourself



## Study Group

- ▶ Set a location, time and schedule
- ▶ Have an agenda
- ▶ Set the rules
  - ▶ Everyone does their share
  - ▶ Everyone commits to attend
- ▶ Can be a great source of moral support and can help decrease test anxiety



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## Study Time

- ▶ Review of what you know: 30 to 40%
- ▶ Learning new materials: 60 to 70 %
- ▶ CDE® prep courses, flash cards & sample tests
- ▶ Teach the content to someone else
- ▶ Use down time/waiting time productively



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## Knowledge = Confidence

- ▶ Most important aspect of test taking
- ▶ Knowing the content will improve your confidence
- ▶ As you study your knowledge base expands



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## Diabetes Ed Course – Earn 32 CES



- ▶ **21 CEs for the Live Seminar plus**
- ▶ **10 Bonus Online Courses, Earn 11.0 CEs –** we include the content that *best* helps you succeed at the CDE® Exam and clinical practice.
- ▶ **Plus 100+ page syllabus, healthy breakfast all days, gourmet lunches, CE certificates and a fun and engaging learning environment.**
- ▶ **Course fee of \$599**



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## CDE® Success Page



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